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Montana Legal Services Association	
2005 Child Custody Pro Bono Project	_

CHAPTER II - CHILD CLIENTS: HOW TO MEET SPECIFIC NEEDS OF A CHILD CLIENT

The Chapter II materials provide information specific to working with a child client, including warning signs that could indicate serious distress

Specific Needs of a Child Client:

1) Talking with children effectively is different than talking with an adult

Pages 22 - 24

- a) Life experience:A child only knows their own experience
- b) Meanings of questions:Five ways questions are used/perceived
- c) Conceptual development: numbers, kinship, prepositions
- d) Words with double meanings
- 2) Family transitions, or co-parenting disputes, are stressful for children.

Pages 25 - 44

- a) Many children will weather a family transition without developing any long term or severe difficulties.
- b) Some children who experience a family transition or co-parenting dispute *may* develop problems socially, emotionally, physically, and educationally.
 - Attorneys should be familiar with red flags that a child client's distress is becoming severe and may need referrals for support. Red flags change with the child's age.

Montana Legal Services Association Child Custody Warning Sign Guide

Pages 26 - 39

Child Mental Health Resource List

Pages 40 - 44

3) It is imperative for a child's attorney to have contact with:

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- a) the child client's physician;
- b) the child client's school or child care center; and
- c) anyone who the child identifies as a significant relationship
 - i) coach
 - ii) pastor
 - iii) neighbor
 - iv) scout, 4-H, service club leader.
- 4) Children need parenting plans they can count on.

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- a) Waiting for a parenting plan, especially in a chaotic situation without predictable routine, may impact a child's development.
- 5) Child-centered parenting plans and residential schedules.

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- a) Years 0-3
- b) Years 3-6
- c) Years 6-12
- d) Years12-17

How #1:

How to talk with children²

The guidelines below apply absolutely to children between the ages of 2 and 10; and often apply to young people who are chronologically over the age of 10 but whose language usage is not consistent with their age. Although a child client may have an impressive vocabulary and sentence structure, attorneys need to remember that use of words is not the same as comprehension of meanings.

Framing:

Before an attorney begins to elicit information from a child client, the attorney's role in relation to the child must be 'framed.' Since children operate with limited life experience, they do not have a context for every adult. Framing is as simple as giving the child a context, a reason why you are talking.

- 1. In simple words tell the child what your job is.
- 2. In simple works tell the child why it is part of your job to talk with them.

<u>[Framing example for a child between 4 and 8 years old:]</u>
The five sentences below will help the child understand why you are talking to them, and give the child enough information to form their own questions for you.

"I have an office in town. I help kids when their families are changing. My job is to know about rules and laws for parents. I will talk with you. I will learn what you believe is important. My job is to help."

Questions:

Questions have five different functions.

- 1. Elicit information Do you know the neighbors?
- 2. Test knowledge Where is the Dairy Queen?
- 3. Make suggestions Why don't you paint it purple?
- 4. Give direction Would you please put the toys away?
- 5. Make accusations Why did you leave the gate open?

In a child's view, an adult is a person of authority, thus being questioned by any adult may cause some worry. In school, children are expected to provide an answer whenever they are questioned. Some parents, or other adults, use

² Walker, Anne Graffam (1994). Handbook on Questioning Children: A Linguistic Perspective. ABA Center on Children and the Law, Washington, D.C.

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questions to children abusively. Sometimes children will feel pressured to provide answers even if they really don't know the information, or even when they do not understand the questions.

Attorneys need accurate meaningful information from child clients. It is important to tell the child that "I don't know" or "I don't understand" are appropriate responses when they talk with their attorney. Children like examples, and a chance to practice what they are being asked to do. An attorney can create a practice opportunity, and build relationship simultaneously, by asking a question the child cannot possibly answer.

[Example for practicing I don't know:]

"Let's practice saying I don't know."
"Holly, what color is my house?" or "Aaron, what do I call my dog?"

After you ask the question, listen to the response and acknowledge that you knew there was no way they could give you the correct answer – and you expect them to say "I don't know" whenever they don't know the answer. Some children need to do this practice exercise twice to feel confident. If your client seems confused about the concept then practice a couple more "I don't know" questions.

Conceptual Language:

When an attorney needs specific information from a child client it may be necessary to talk about abstract concepts, and although the child may vocabulary which describes the concepts the child may not use the words accurately.

- Numbers: Counting words and the ability to say numbers in a correct sequence is not a demonstration of understanding numerical values. The question "How many times did that happen?" will probably elicit a numerical answer, but the number may not have any meaning.
 - Attorneys can use the first time/last time strategy to try to learn how long something has been happening. "Tell me about the first time that happened?" or "When was the last time that happened?"
- 2. **Kinship:** Children under the age of 10 are still learning family relationships. Asking a young child to tell you about the biological or legal relationships in their family may add confusion to the conversation. Try to obtain kinship information from a collateral source. Kinship terminology and familial roles differ with culture. It is

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important for a child's attorney to be informed about the culture of the family.

- 3. **Prepositions:** The relationship in space of objects to other objects, or people to objects, or people to people is extremely abstract for a child. Prepositions are the words that demonstrate location in space for people and objects. If the attorney must have information about where the child was in relation to an object, or another person, then it is important to learn if the child client can use prepositions accurately. The best way to gain information about where the child was, or what happened, is to ask the child to demonstrate what happened. Provide a teddy bear and another object and ask the child "Use the teddy bear to show me what happened so I can make sure I understand." Prepositions may add confusion to the conversation.
- 4. Double Meanings: The legal arena is rich with words that can confuse a child, such as party, hearing, court, strike, minor, case, charges, swear, and before. If a child client is participating in formal legal conversations it is important for the child's attorney to recognize words with double meanings and provide an explanation to the child. If the child is going to attend a hearing, or talk with the judge, it is critically important to review the formal vocabulary of the courtroom as part of preparation for court.

How #2:

How to help a child client cope with family transition

Change is stressful for people at any age. Even positive change can cause stress and anxiety. As dependents, children have little control over family changes which impact their lives. Many children weather changes in the family with a normal and manageable amount of distress; other children will need some extra help with their stress during a family transition. The more prolonged conflict between parents, the more likely a child will suffer intensely or develop problems which need intervention.

A change in the family may feel like a loss to a child; thus, some sadness, frustration or even anger is an appropriate response. If the child continues to participate in a daily routine and to meet responsibilities reasonably well, then it is likely the child's reactions are not going to interfere with growth or learning. The sad feelings may ebb and flow over time as the child adjusts to the new family configuration, new locations, and changed schedules.

An intervention is a planned response to a problem. Therapy, counseling, or evaluation of parents and/or the child are all standard family transition interventions. An unnecessary intervention for a child whose responses are simply normal will only increase stress. One Montana judge sums it up by saying he doesn't approve of sending children to therapists when it's the parents who have the problem. It makes no sense!

Child assessment is a broad, complicated process which requires a licensed professional who is trained in administering and scoring results for tests and screenings of children. A child's attorney, however, should be training to recognize Warning Signs and Red Flags as indicators of a child client's distress.

<u>Warning Signs and Red Flags:</u> The key for a child's attorney to recognize when a child may need intervention is to be alert for warning signs and red flags. A red flag is some type of change or difference in the child's behavior or ability that was not present prior to the family transition.

The presence of a red flag <u>may be</u> an indicator that there is a problem, and the absence of any red flags is not an assurance that there is not a problem.

A child's attorney is a critical link to support for a child who is struggling. Parents may become so distracted by divorce or custody disputes that they temporarily abdicate normally competent parenting and simply fail to focus adequately on their child's experience.

Warning Sign Guide for Children's Attorneys:

Most children are normal. They accomplish their developmental tasks within the average time frame. Their behavior is appropriate for their age, and they enjoy and are loved by their parents.

Developmental tasks are predictable expected skills and abilities every healthy child will accomplish within an established age range. Child development is tied to brain development; in that sense it is a physiological process. The absence of developmentally expected skills and abilities for a child's age is solid reason for concern.

Behavioral norms are also predictable and expected for every healthy child with considerations of differences of temperament, personality, and environment. The presence of behaviors which are younger than a child's age, or older than a child's age, or behaviors which interfere with relationships, day to day normal living, or the child's safety are solid reason for concern.



Warning Signs: Developmental

✓ Chronic physical illness

- Consistently oppositional behavior at any age (continually challenging rules and limits)
- ✓ Frequently inconsolably sad or angry to the point of disruption of day to day routine and ability to accomplish and complete age appropriate tasks



- ✓ Low birth weight (below 5 pounds 8 ounces)
- No response to sounds including a lack of eyes moving.
- ✓ Infant unable to use eyes to look at and follow a face held 12-24 inches from the infant's face

- ✓ Sleep Disturbances (frequent waking, unable to sustain sleep for at least two hours)
- ✓ Eating / Feeding problems
- ✓ Failure to discriminate mother (or primary care giver) from others
- Apathetic, withdrawn (no facial or physical expression of interest in social interaction)



- ✓ Infant not using eyes to follow a person's movement across a room
- ✓ Infant's head is not supported by the neck when held in a sitting position

- ✓ Sleep Disturbances (frequent waking, unable to sustain sleep for at least two hours)
- ✓ Eating / Feeding problems
- ✓ Parents' who don't enjoy their child (don't look at their children when feeding them, don't hold their children often, propping bottles rather than holding during feedings)
- Parent's describing frequent inconsolable lengthy crying jags by the infant
- Excessive irritability by infant



- ✓ Not eating any solid foods still exclusively bottle or breast fed
- ✓ No vocalized babbling sounds
- ✓ Baby should be using both hands to grasp/grab/hold objects within reach; including holding a bottle.

- ✓ Sleep Disturbances
 (frequent waking, unable to sustain sleep for at least four hours)
- ✓ Eating problems
- Frequent inconsolable lengthy crying jags by the infant
- ✓ Baby is not suspicious when strangers approach
- ✓ No interest in objects or play
- ✓ Unusual movements: continual rocking, head banging, obsessive finger sucking



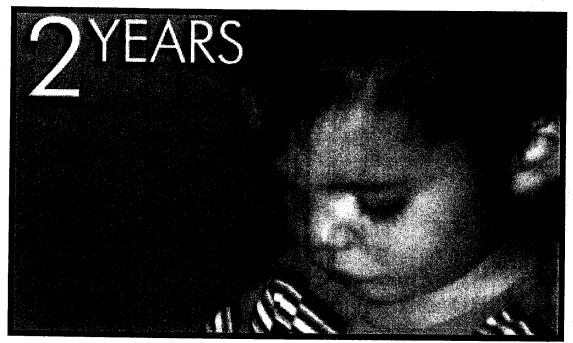
- Children who cannot move on their own (rolling around counts as moving).
 Should be pulling themselves up on furniture, crawling, rolling
- Should be waving, picking up food with fingers, and pointing to interesting things and absence of these physical behaviors is of concern.

- ✓ Sleep Disturbances
- ✓ Eating difficulties: food refusal, finicky eating
- Frequent inconsolable lengthy crying jags by the infant
- ✓ Doesn't notice or care when parents leave and fails to become agitated or withdrawn when a stranger approaches, or when a stranger picks them up and leaves the room.
- ✓ Low frustration tolerance, unable to persist trying an activity or task due to frustration



- ✓ Speaks fewer than 5 words,
- ✓ Doesn't point at items
- ✓ Not walking at all
- ✓ Not making sounds
- ✓ No response to one simple instruction from a caregiver – such as come here

- ✓ Sleep disturbances
- ✓ Eating difficulties: food refusal, finicky eating
- ✓ Doesn't respond to any social interactions
- ✓ Poor or no eye contact
- Frequent inconsolable crying or raging episodes



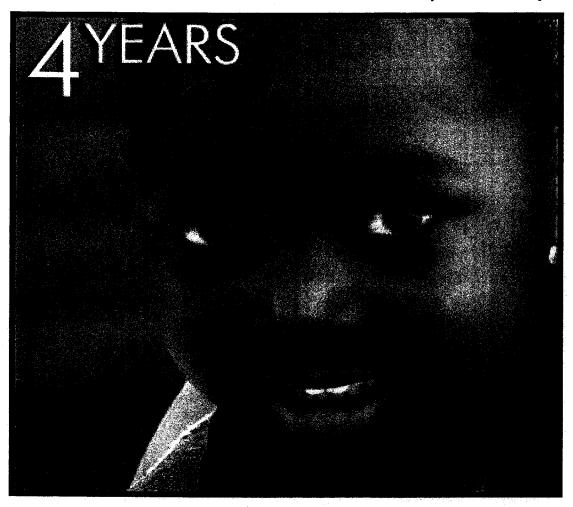
- ✓ Doesn't understand or use any words to communicate should be talking even if only parents understand the meaning of words.
- ✓ Is not trying to, or succeeding in running
- ✓ Is not able to hold a marker and make lines on paper

- ✓ Expresses many fears
- ✓ Aggressive biting, hitting or throwing even after receiving directions to stop those behaviors
- ✓ Clings to primary caregiver even in familiar situations or locations
- ✓ Inconsolable after 20 minutes of crying or tantrum
- ✓ Regression to younger behaviors – crawling instead of walking or stops sleeping through the night



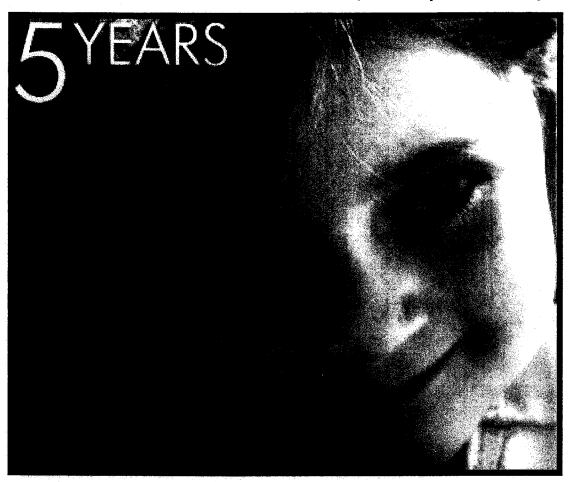
- ✓ Shows severe anxiety, crying or tantrums, about separation from parents
- ✓ Cannot say name and age
- Cannot hold fork/spoons for meals
- ✓ Is not talking well enough to be understood at least partially, by a stranger

- ✓ Has no out of home social interaction time
- ✓ Is or has been asked to leave a day care setting due to aggressive behavior – such as biting, hitting
- ✓ Is or has been asked to leave a friend's house due to aggressive behavior
- ✓ Parents should be able to tell attorney about the make believe games played by their child



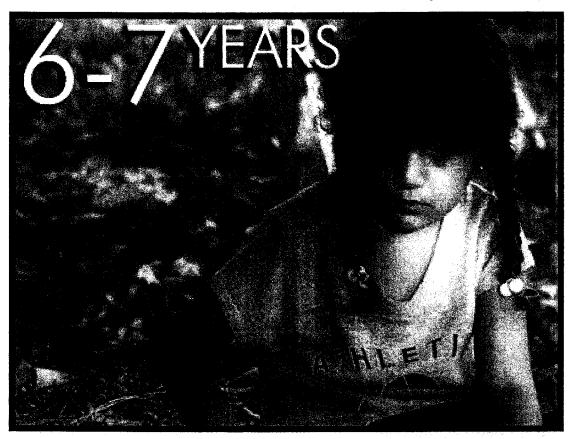
- ✓ Is not talking well enough to be clearly understood by a stranger
- Child is not dressing herself or himself.

- ✓ Bites others
- ✓ Smears his/her own feces
- ✓ Is not toilet trained completely during the daytime
- ✓ Regresses with toilet training. Begins to wet or soil pants after successful toilet training.



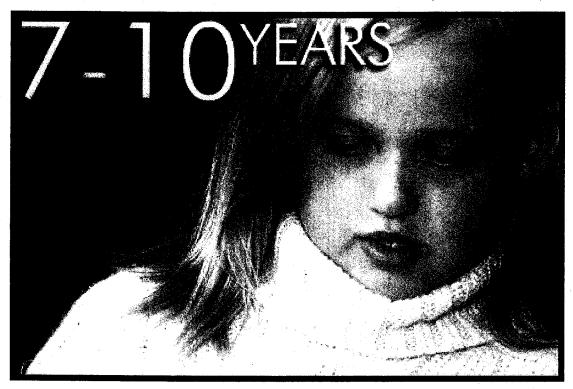
- ✓ Can't skip
- ✓ Has difficulty holding a pencil or crayon to allow drawing
- ✓ Is unable to complete a three step task in the order given (e.g. pick up your toy, put it in the toy box, and come here)

- Deliberately breaking objects
- ✓ Hurting animals
- ✓ Regresses with toilet training
- ✓ Any infliction of pain, or injury to himself



- ✓ Has not mastered basic reading skills
- ✓ Disrupts activities with peers – developmentally should be able to play cooperatively
- ✓ Disrupts classroom developmentally should be able to sit in class and follow directions from a teacher

- ✓ Refuses to attend school despite parents' efforts
- Begins to act angry or make angry statements to their primary caretaker
- Complaining of physical ailments in the morning on school days
- ✓ Identified by teacher as a behavior problem



- Learning problems that require special education assistance at school
- ✓ Disrupts social peer play with negative activities

- ✓ No best friend
- ✓ Disrupts social peer play with negative activities
- ✓ Diagnosed with a chronic illness (e.g. rheumatoid arthritis, diabetes) fewer than 5 percent of children have chronic illness which limits activity³
- ✓ Trying to be the "perfect child"

³ Dixon, Suzanne D., Stein, Martin T. (2006). <u>Encounters with Children: Pediatric Behavior and Development</u>, fourth edition. Mosby Elsevier, Philadelphia, Pennsylvania. p. 529

1 1 4 YEARS

Warning Signs: Developmental

- Should be an onset of puberty with appropriate physical growth and change during these years.
- ✓ Difficulty adjusting to the next grade or level in school not keeping up academically with peers even with prior academic success

- ✓ No friends
- ✓ Sexual activity
- ✓ Prolonged family discord which the child can describe – discord between the adults when the child is present
- ✓ Decline in school performance
- ✓ Alcohol or drug use
- ✓ Delinquency or destructive behavior
- ✓ Repeated (more than two) referrals for discipline at school
- ✓ Lack of accountability about what, where, when and who they are with when not at home
- ✓ Trying to be the "perfect child"

15-17 YEARS

Warning Signs: Developmental

- ✓ Cannot link cause and effect
- ✓ Unable to link two or more variables to solve a problem
- ✓ Sudden decline in grades could indicate an undiagnosed developmental gap

- √ "loner"
- ✓ Promiscuity
- ✓ Prolonged family discord which the child can describe – discord between the adults when the child is present
- Decline in school performance
- ✓ Seriously delinquent behavior – not status offenses
- ✓ Out of home placement either mandatory or voluntary
- ✓ Alcohol or drug use
- ✓ Depression
- ✓ Lack of involvement with school activities, hobbies, or employment

If you are concerned that your client is exhibiting any red flags, then it is important to consult with a child mental health professional.

Montana's geographic diversity, particularly in our extremely rural areas, may present some challenges in locating a certified or licensed professional for consultation.

The resources below are suggestions about how to locate child mental health or social service resources from anywhere in Montana. The agencies below are licensed in Montana as a Mental Health Center.

[Child Mental Health Resources:]

Multiple Services areas statewide:

1. A.W.A.R.E.

Contact: www.aware-inc.org

2. Youth Dynamics Inc.
Contact www.youthdynamics.org

3. IN-CARE Network Inc.

Contact: 406-294-9616

2906 2nd Ave

Billings, MT 59601

4. Youth Homes, Inc.

Contact: 406-721-2704

P.O. Box 7616

Missoula, MT 59807

West of the Continental Divide:

5. Northwest Behavioral Health

Contact: 406-844-2890

7325 Hwy 93 Couth Lakeside, MT 59922

6. Western Montana Regional Community Mental Health

Center

Contact: 406-728-6817

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Building T-9 Fort Missoula Missoula, MT 59804

7. Bitterroot Valley Education Cooperative

Contact: 406-777-2494

300 Park St.

Stevensville, MT 59870

East of the Continental Divide:

8. Eastern Montana Mental Health Center

Contact:

406-234-1687

2508 Wilson Street Miles City, MT 59301

9. Alta Care of Montana

Contact:

406-494-4183

55 Basin Creek Rd. Butte, MT 59701

10. Golden Triangle Community Mental Health Center

Contact:

406-761-2100

915 1st Ave.

Great Falls, MT 59401

11. Golden Triangle Community Mental Health Center

Contact:

406-443-7151

900 N. Jackson Helena, MT 59601

riolona, wr cocc

12. Intermountain Children's Home

Contact:

406-442-7920

500 S. Lamborn

Helena, MT 59601

13. New Day Inc.

Contact:

406-254-2340

301 Coburn Rd. Billings, MT 59601

<u>Public School Systems:</u>

Children in every Montana community are attending school. Educators and administrators in local public school system are a good source of information about social and mental health services in your geographic area. If it is difficult to locate child mental health resources nearby, then contact your school system and inquire about child welfare professionals.

Montana Division of Child and Family Services:

The child protective system works closely with child mental health providers all over the state, and can serve as a local resource for attorneys representing children in non-dependent neglect cases. Your local county office of Child and Family Services is a good resource. There are five regional Child and Family Service offices:

[Child and Family Services Regional Offices:]

Eastern Region I

(Carter, Custer, Daniels, Dawson, Fallon, Garfield, McCone, Phillips, Powder River, Prairie, Richland, Roosevelt, Rosebud, Sheridan, Treasure, Valley, and Wibaux)

Contact:

Regional Administrator

PO Box 880 708 Palmer

Miles City, MT 59301 (406) 232-1385 (406) 232-6755 Fax

North Central Region II

(Blaine, Cascade, Chouteau, Glacier, Hill, Liberty, Pondera, Teton, and Toole)

Contact:

Regional Administrator 2300 12th Avenue South

Suite 201

Great Falls, MT 59405

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(406) 727-7746 (406) 268-3788 Fax

South Central Region III

(Big Horn, Carbon, Fergus, Golden Valley, Judith Basin, Musselshell, Petroleum, Stillwater, Sweet Grass, Wheatland, and Yellowstone)

Contact:

Regional Administrator

2525 4th Avenue North, Suite 309

Billings, MT 59101 (406) 657-3120 (406) 657-3178 Fax

Southwest Region IV

(Beaverhead, Broadwater, Deer Lodge, Gallatin, Granite, Jefferson, Lewis & Clark, Madison, Meagher, Park, Powell, Silver Bow)

Contact:

Regional Administrator

316 North Park PO Box 817 Helena MT 59624

(406) 444-2030

(406) 444-1681 (FAX)

Western Region V

(Flathead, Lake, Lincoln, Mineral, Missoula, Ravalli, Sanders)

Contact:

Regional Administrator

2677 Palmer Street, Suite 300

Missoula, MT 59808 (406) 523-4100 (406) 523-4150 Fax

<u>Private Individual Mental Health Providers:</u>

Montana requires licensing for psychologists, licensed clinical social workers, licensed professional counselors, and licensed addictions counselors. The phone book is a good resource for the individual practitioners in your geographic area. When you call to consult about a child case, begin by asking if the provider is experienced working with children.

[Professional associations are also a good resource:]

- National Association of Social Work Montana Chapter: www.naswmt.com
- 2. Montana Counseling Association www.montanacounseling.org
- 3. Montana Clinical Mental Health Counseling Association www.mcmha.org
- 4. Montana Psychological Association wtp.net/mpa

How #3:

Collateral Contact for the Child's Attorney

In order to develop a comprehensive picture of a child's life, their needs, likes and dislikes, their interests, the attorney will need to contact other adults who know their child client well.

Keep in mind that, as mentioned in Chapter I, children elicit a sense of collective responsibility from adults and expect the collateral contacts to have biases and opinions. It is important to apply facts to a child client's case so the attorney may have to spend time prioritizing the information from collateral contacts based upon the context of those relationships and the parental dispute.

- At least one contact with a child's physician is important. A current health history may provide useful information for decision making. Generally physicians will not see their young patients too often so they may not have a close relationship, but physicians are a critical source of information.
- 2. Attorneys for children will want to contact their client's teacher or child care provider; these contacts are experienced adults who see the child daily and can provide information about:
 - a. warning signs and changes in the child's behavior since the parenting dispute began;
 - b. learning progress;
 - c. social behaviors;
 - d. emotional states;
 - e. the parents; and
 - f. family and other close relationships.
- 3. Ask your young client who is important to them. Whomever they identify is potentially a source of important information about the client. Any adult leader of youth activities, long term neighbors, spiritual leaders, or coach may be good impartial contacts who will help the attorney understand the child.

When at attorney represents a child, collaboration is central to the case. Gathering information and asking for recommendations from others who know the young client is essential to reach disposition of the child's best interests.

How #4

Advocate for a Plan the Child Can Count On

The purpose of childhood is to learn how to make sense of the world, in order to grow up and live well. Children, in their limited experience, may only interpret the world based upon whatever meaning is provided by their caregivers.

Children require an adult caregiver to interpret the environment, thus one very important task of infancy early childhood is to develop a strong primary relationship with a caregiver who will help interpret the environment and consistently meet the child's needs.

- When family transitions cause chaos and disorganization in the family for a short time, six months or less, children will probably tolerate the changes and accommodations just fine.
 - a. How the child responds to changes and even short terms chaos is closely related to the age and developmental stage of the child. It is important for a child's attorney to anticipate significant milestones in the child client's future and inform the court about the need for planning.

[Example: A 5 year old ready to begin kindergarten]

Kindergarten is an important milestone for children. Ideally the child would know in advance which school they will attend, have opportunity to visit the classroom and meet the teacher prior to the first day, know who will take them to school and who will pick them up, and have a clear path of communication between the teacher and parents.

But, if parents are distracted with divorce or disputes, perhaps moving residences or changing jobs, then the basic supports for their five year old may not be available and the kindergartener may become anxious about school.

When parents dispute their respective responsibilities to their children, the stability and consistency children need from day to day may be compromised. A child's attorney can advocate for their child clients need to have a solid plan in place even while the parents are in turmoil.

How #5

Attorneys Can Inform the Courts of Child Centered Parenting **Plans**

In Montana, several judicial districts have implemented an orientation for parents who file for dissolution or parenting plans. The orientations last about two hours and parents are ordered to attend prior to finalizing their parenting plans. From community to community the curriculums vary, but have common objectives:

- 1. To educate parents about child development and child centered parenting plans and residential schedules.
- 2. To educate parents about the elements of a parenting plan
- 3. To educate parents about their options for dispute resolution
 - (a) to encourage parents to use the courts appropriately

The curriculums have been researched and written collaboratively by family law attorneys, child mental health providers, and district court staff. The materials are research based, not simply opinions.

The following information is from the First Judicial District's orientation titled **Children First.** The complete presentation is included in the materials in Appendix 12.

Residential Schedule Recommendations:

AGES 0-3:

- 1. Contact with each parent every day or two that is predictable and routine
- 2. Living and child care arrangements that don't change often
- 3. One primary home

AGES 3-6:

- 1. Frequent and regular contact with each parent
- 2. One primary home
- 3. Up to week long contacts with the other parent on an occasional basis

4. The same child care provider

AGES 6-12:

- 1. Longer periods of time with each parent
- 2. One primary home is not as important, but overnight transitions during the school week are to be avoided
- 3. Strong communication between parents and rules that are the same at each home are very important

AGES 12-17:

- 1. Consistency between parents regarding rules and limits
- 2. A high degree of communication between parents

A child-centered and age appropriate residential schedule is critically important for children whose parents do not live together. Parents love their children and typically both parents want to be with their children at every opportunity. Particularly for young children, parents need to consider the child's experience of a residential schedule which has frequent transitions between homes.

[Example from the Children First presenters:]

I want each parent in the class to take a moment and imagine the following scenario.

One day your attorney hands you some papers, a court order from the judge. You have had no control over how this order was written, or what evidence the judge heard to reach these conclusions. You have to follow the order, it is legally enforceable.

The order says your children will stay in the family home, and you and your co-parent will each rent separate apartments to live in when you are not the residential parent. The children will not have to move.

You locate an apartment and make arrangements to move in. You have to decide how to obtain and arrange the furniture, household goods and clothing you need each day for living in your apartment.

You change your mailing address to your new home in your

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apartment, and you arrange your newspaper delivery to your apartment as well. You order a phone for your apartment, and set up an answering machine.

You arrange for your employer to know both your addresses and all your phone numbers in case you must be reached after work hours.

Every week on Wednesday after work you pack up everything you will need for the following week and you take it to your family's home and move in for your parenting time. You live in the family home for one week, and then on Wednesday after work you pack up everything you brought from your apartment and move back to your apartment for one week.

Each week when you change residences you must play catch upon all the little things you missed at each residence while you were gone.

Every Wednesday, Every Week, All Year, Year after Year.